Docket No. SYB/0110.01

PTO/SB/81 (06-03)
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	Application Number	
POWER OF ATTORNEY	Filing Date	
and CORRESPONDENCE ADDRESS INDICATION FORM	First Named Inventor	Chitkara
	Title	Dagabasa System Providing SQL Extensions for Authorist Energytion and Decryption of Column Data
	Art Unit	Unassigned
	Examiner Name	Unassigned
	Attorney Docket Number	SYB/0110.01

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		SIGNATURE of Applicant or	Assignee of R	Record		
Name Rajnis	h_K. Chitkara					
Signature Ray	<u>.</u>					
Date Octobe	er 11, 2004			Telephone	510-573.	- 0158
NOTE: Signatures of all forms if more than one s	the Inventors or assignces signature is regulred, see be	of record of the entire interest or the	er representative	o(s) are required. (Submit muttple	
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<u> </u>	Application Number	
POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM	Filing Date	
	First Named Inventor	Chitkara
	Title	Dacabase System freviding SOL Excensions for Aucemated Encryption and Decryption of Column Data
	Art Unit	Unassigned
	Examiner Name	Unassigned
	Attorney Docket Number	SYB/0110.01

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Statement under 37 CFR 3,73(b)	is enclosed. (Form PTO/SB/96)			
	SIGNATURE of Applicant or Assignee of	f Record		
Name Barbara J. Banks	g			
	nhs	Telephone (50) 542 - 2402		
Date October 11, 2004		1 1 1(2)2/2 (6 2 1)2		
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Application Number Filing Date POWER OF ATTORNEY First Named Inventor Chitkara and Database System Providing SQL Extensions for Automated Energyptics and Decempoion of Column Data **CORRESPONDENCE ADDRESS** Art Unit Unassigned INDICATION FORM **Examiner Name** Unassigned Attorney Docket Number SYB/0110.01

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I am the: X Applicant/Inventor,		•	
Assignee of record of the entire interes Statement under 37 CFR 3.73(b) is en	st. See 37 CFR 3.71. closed. (Form PTO/SB/96)		
sı	GNATURE of Applicant or Assigne	e of Record	
Name Anita R. Patel			
Signature art Putel			
Date October 11, 2004		Telephone	(510) 247-1060
NOTE: Signatures of all the inventors or assignees of forms if more than one signature is required, see below	record of the entire interest or their represe w*.	entative(s) are required	I. Submit multiple
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